

July 21, 2009

Andre, if the United States can put men on the moon, they have the courage, strength, intelligence, and will to reform health care! I believe that we MUST provide better quality care, lower insurance/medical costs, and enable people to obtain coverage.

I sell health insurance and have clients who desperately need medical attention because of issues; they are rejected by insurance companies or face astronomical premiums. I have clients who just don't buy the medicine that they need because they cannot afford it.

I have a serious, incurable medical condition myself, and I continually have to question my medical providers about the costs involved in tests and medications. I don't know whether they are trying to avoid malpractice charges, getting kickbacks from the hospitals and pharmaceutical companies, or contributing data to research, but I find it deplorable.

I have a client who spent 7 weeks, going through multiple x-rays, MRIs, and even a possible

diagnosis of cancer in her local community. In desperation, she went to Mayo Clinic and within three days had the test and the required surgery to resolve the problem. Why?

Now is the time to stop being Republican or Democrat. Now is the time to stop letting industry bully us around. We must pull out the CAN-DO attitude and get on the path to resolve this issue. It's about people, not business.

Thank you.

July 22, 2009

Congressman Carson:

I am a 52 year old male, gainfully employed and covered by my employer's health insurance plan. Over the years, my family and I have had the advantage of very good access to health care, both in traditional and HMO type plans. As a nation, we enjoy the best technology, the best physicians, and the best facilities in the world, all because the free market system has been allowed to work the way it was designed. Yes, health care, medical treatments, prescription drugs, etc are expensive, but so is the research and development that goes into making those things available.

Needless to say, I have serious misgivings about the federal government's ability to effectively and efficiently manage our nation's health care system, and its ability to provide a viable health insurance plan as an option for those who want it. When I think of any government run plan of any type, it immediately conjures up images of cost over-runs, unnecessary bureaucracy, sluggish and inflexible policies, etc. I also don't believe that private insurance companies would forever be allowed to compete with a federal insurance program. Insurance companies survive because they can spread the cost over a large group of people, with the company enjoying fewer losses than wins. My fear is that as the governmental program would take on more at-risk and lower income segments of the population, the losses that would begin piling up would eventually lead to legislation doing away with private plans in order to be able to spread the cost over the entire population.

In summary, please vote against any legislation that would nationalize our health care system.

I was also concerned to read on your forum website the disclaimer “**Please note** that the opinions expressed below are those of Seventh District constituents and do not necessarily

represent those held by Congressman Carson or his office.” Please don’t forget that you are in office to represent the views of the majority of your voting constituents. That is what the office of “Representative” was always meant to be.

Sincerely,

Verlin

Indianapolis

July 23, 2009

Congressman Carson,

We have met and discussed this issue several times, but I want to share my thoughts within this forum. As a disclosure, I am an orthopedic surgeon in a large private practice group here in Indianapolis. I am also a part owner in several surgery centers, MRI and PT centers, and even a specialty hospital. I also serve on a national basis as a Board of Councilor Representative in my specialty, which is a representative body of surgeons that makes policy within our profession.

To keep this brief, the AMA no longer represents most practicing physicians. They signed on to this recent bill because they want a seat at the table later. They know this bill will be bad for doctors in its current form, but are hoping to influence it later.

I am against a government run healthcare system. Currently, the government pays for roughly half of our healthcare, and you can see how well that is working. When your house is on fire, what do you do? Apparently, in DC, you start adding on to the house instead of saving the one you have now. We can't afford the current healthcare entitlement programs such as Medicare and Medicaid, so why in heaven's name would anyone with sense expand these?

Very few have read the approximately 1,000 page bill that passed out of committee, even the President admitted he is not familiar with certain provisions, but how could he be? In its current form this bill will force employers to eventually shove their employees onto the "government

option" plan, which by the way, the Senate Finance committee members voted that they would not have to take! Current ERISA protections would be erased, allowing tort lawyers to sue companies for denial of coverage decisions made by insurance companies. The 8% payroll tax for companies who don't offer insurance is designed to be cheaper than the cost of providing insurance, thus incentivizing companies to get rid of insurance and transfer people onto the government plan. I sit on the Board of our company, which employs 800 people in Marion and surrounding counties. 8% of our payroll is much less than we spend on health insurance for our employees.

I am offended by the President's assertion that physicians do too many procedures, order too many tests and over utilize for profit. I have shared studies with you that absolutely refute this and demonstrably show the opposite to be true. The issue is not do we perform too many, but that most countries ration care and don't do enough! No where in this bill is anything done regarding tort reform in medicine, which costs the system at least 100 billion per year. Indiana is a model state for this, and I encourage you to champion this idea in any reform bill.

Also, the 47-50 million uninsured number is not real, and everyone knows it. The hardcore uninsured number is 15-20 million, or approx 5-7% of the population, and like hardcore unemployment, this is unlikely to change, even with "universal coverage"

Are there problems with healthcare in this country. Not really, the issue is insurance portability, affordability and durability. None of these will be helped by government intervention. To the contrary, government intervention by way of mandates has driven up the cost of insurance. Most people are completely over insured because the federal and state governments mandate that everything from acupuncture to x-ray be covered in every policy sold by the insurance companies. This is like having car insurance cover gas, detailing and a new paint job because you don't like the color of your car. The insurance companies (of which I have no great love) would love to sell basic policies for young healthy people at low rates, but can't due to

government interference.

Finally, why the rush?? It is becoming clear that the only reason for the mad dash on healthcare is to avoid the light of day from reaching these bills. The more people learn about what is really in these proposals, the less they want them! With healthcare making up 17% of our GDP, there is no legitimate reason to jam this through congress and down the throats of Americans! SLOW down, and lets have an honest debate about how to really make insurance more portable, affordable and meaningful (right type of policy for right person) than create multiple new government bureaucracies to tell us how to live.

Sincerely,

Eric, MD

Indianapolis, IN

July 23, 2009

Dear Representative Carson:

AARP suggested that we write our congressmen with stories of our personal healthcare crises. So I am writing to share with you just one of what I know are hundreds of thousands, if not millions, if similar stories regarding a system that has failed, is failing, and will continue to fail unless some action is taken.

My husband and I are both professional free-lancers in the video/film production industry in Indiana. I have been self-employed for twenty years; my husband was "downsized" from his salaried position in 2002 and, unable to find other full-time work, has been freelancing since that time as well. Losing his company's health insurance benefits, we had no choice but to find "affordable" private insurance. At the time (2002), we had managed to save approximately \$25,000 for just such a "rainy day" occurrence as (temporary) loss of income. As an unfortunate coincidence, I was the "lucky" one to get sick twice in the ensuing four years - the first was discovery of a lower abdominal cyst that had to be surgically removed, and the second was an emergency hospital admittance in 2006. Even as we continued paying our private insurance premiums faithfully, these two medical occurrences wiped out 50% of our savings -- approximately \$12,000. As a result, instead of having enough savings to pay our monthly bills for 6-8 months (as recommended by most financial experts), we had only a 3-4 month cushion. That was depleted within the year, even though both of us continued finding work.

Again, this all occurred within a brief 4-year span. At present, my husband and I still continue to scrounge for work; our joint income has DECREASED approximately 60%. Our savings were completely exhausted by 2007. We continue to pay our private insurance premiums for fear either of us will have another major hospitalization; however, we do not have the funds to pay our portion for wellness and prevention checkups and visits to the doctor, the dentist, or the optometrist.

It's all well and good to have a 20-25% negotiated discount with a provider unless you can't come up with the remaining 75-80% of funds needed to pay the bills.

We have health insurance...but we can't afford to use it. What kind of insanity is that? If our current economic plight continues, we will be unable to afford the premiums and will be forced to drop out of our private insurance plan before the end of this year, joining the ranks of the other 30 billion or so uninsured Americans.

The only saving grace is that we do not have children. I can't imagine being in our situation and also trying to keep a child, or children, healthy and safe. And the fact is, we know friends and colleagues who are in this exact desperate situation. I realize that there are others who have even more horrific tales to relate and are in much direr straits than ourselves. If we -- college graduates and professionals for more than 30 years each -- are struggling to keep our heads above water to pay the mortgage, monthly bills and taxes, find employment, and stay healthy in the process, then how in the world can other struggling families hope to keep from becoming completely overwhelmed and drowning? We consider ourselves responsible citizens, but it's become increasingly difficult to maintain our dignity while shouldering an ever-increasing weight of fiscal responsibility that appears to have been dropped upon us from ivory towers above.

I am not proud of being in this situation. But if my and my husband's story helps augment real, authentic change in health care in Indiana and the U.S., then please use our experience in the spirit in which it is given.

Carrie

Indianapolis, IN

July 25, 2009

Mr. Carson,

I'll keep this short. I need affordable healthcare. I'm 32, healthy, and have only ever had insurance for 6 months since I became an adult.

I'm self-employed, and the horror stories about individual insurance have kept me away from the high-priced plans. Plans that work as auto-renew and cancel coverage for "pre-existing conditions" as they renew have scared me. Watching my family fight with companies who default to "no" until you fight for a "yes" have scared me.

So I'm in a vicious cycle. I can't go to the doctor for anything, lest I get diagnosed with a pre-existing condition. I know I have some mental issues, but I am waiting for some miracle of continuous insurance before I will allow myself to be diagnosed.

Otherwise I'm a healthy individual, I don't drink, smoke, drive recklessly, or harm myself. I would be a valuable asset as a payer into any system, as I shouldn't need its services beyond medicinal help for dozens of years. I will not endorse the practices of the current system, or join in, until the flaws can be repaired.

I voted for Obama because of his promises for health care reformation.

I will vote against anyone who blocks it. even a little. it's the ONLY issue for me.

This fight is only beginning.

I met your mother once, a few years ago. a gracious woman. I actually think you were there, too, although we were not introduced. I'm proud to see you carry on her reforms and careful eye on my pocketbook.

Please reform this system so I can vote for you again.

Alex

Indianapolis, IN

July 26, 2009

Congressman Carson,

AARP sent me an email and asked me to contact you, so I am.

We do need health care reform, but I strongly urge you and Congress to be very careful to get this right the first time.

While we need health care for everyone, and at a price we can afford, we do not need a complicated structure that few can understand or wade through.

Even Medicare is now so complicated, it's daunting.

I know President Obama is anxious to get this going, but to hurry isn't the answer. There are too many opinions and too much opposition to a 'national'

system. I'm not sure where the answer lies, but it's not what I've seen so far.

I was without health insurance for 6 months in 2007. It was very scary as I was 59. I was then and am now healthy but have minor health issues, such as allergies, which believe it or not, kept me from getting health insurance.

No one would cover me, not even AARP. I finally married a long time partner to get health insurance. I was lucky I had that option as many don't.

Every system in other countries should be studied for their efficiency and over all coverage to see what works.

Keeping in mind our national attitude toward government involvement in our lives, a system that gives everyone coverage and affordable rates is best. It's very expensive to keep paying for those without insurance. It's too bad more people don't understand what it's like to not have health care or insurance for it.

I wish you luck with this and hope it works out for all.

Sincerely,

Carol

Indianapolis, IN

July 26, 2009

Dear Representative Carson,

Thank you for taking the time to read this letter. My wife and I have two healthy children and work for a company that offers health insurance. We are very happy with our coverage. I am, however, concerned about the government playing a larger role in the health care industry.

First and foremost, I worry about any change in the current healthcare system will negatively impact the Baby Boomer Generation. They have spent a great deal of their lives contributing to

the healthcare system. Making them pay more, reducing coverage and/or changing the age eligibility is quite honestly un-American.

Second, I think the Obama Administration will offer every unemployed American healthcare insurance. As a working family, I feel that I will be paying more in my taxes to pay for their coverage. What motivation will the unemployed have to get a job when the working society will be paying for their insurance when most receive unemployment money? Our founding fathers built this country on rewarding hard work. We should not reward the unemployed with free healthcare coverage.

And third, I am deeply concerned that we will model our future healthcare coverage after the United Kingdom's National Institute for Health and Clinical Excellence, or NICE. The program ran out of money and now has essentially become a traffic cop, telling patients what procedures to take and what specific prescriptions to take. Please take the time and read, "Of NICE and Men", The Wall Street Journal, July 7, 2009. This well written article details the raise and fall of the UK's NICE program, and cites many examples of its failures.

With these concerns, I am optimistic that we can find ways to improve the current healthcare system. One way is to encourage more employers and insurance companies to offer health savings accounts. This will undoubtedly give every American more control over how their healthcare dollars are spent.

I would also like to see Congress not pass any law taxing company-provided health benefits. Although this will generate revenue, I don't feel this is the best way to pay for government healthcare insurance. A better option would be to lower the tax rate and let us make the hard choices.

Lastly and the most important by far, I would like to see more from you and other lawmakers, public officials and start taking seriously reducing the federal deficit and have a balanced budget. I worry that my grandchildren and their children will have a bigger debt to pay off, thanks in large part to the current administration's spending habits. We need to start working smarter, not harder.

In closing, I am not a proponent of universal healthcare coverage. I want to see change but neither party is showing change that I am looking for. I would respectfully request that you consider my recommendations before casting your next vote on healthcare reform.

Sincerely,

Chad

Indianapolis, IN

July 27, 2009

Congressman Carson,

I'm a 40 year old African American male, my employer does not offer healthcare insurance therefore it's up to me to provide my very own healthcare coverage. Currently I have a \$5000.00 deductible policy which use to cost me \$87.00/month now I am paying \$125.00/month I very rarely use my insurance because of my high deductible. My coverage reminds me of the insurance commercial Justin Case and that's exactly what it is used for; just-in-case, really can't afford routine exams without breaking the bank therefore I just push things to the side. After receiving my letter from my carrier that my policy was going up in cost they had the nerves to state if I desire a more comfortable policy with a higher deductible just give them a call "please." I don't know the right direction we need to go in order to get healthcare reform, but we do need some sort of reform on healthcare.